ATTORNEY OR PARTY WITHOUT ATTORNEY (Name, state bar number, and address): LAW OFFICES OF WILLIAM R. FUHRMAN WM. R. FURHMAN - SBN # 58751 539 ENCINITAS BLVD., SUITE 111 ENCINITAS, CA 92024 TELEPHONE NO. (Optional) (760) 479-2525 FAX NO. (Optional) (801) 760-454: EMAIL ADDRESS (Optional): ATTORNEY FOR (Name): SUPERIOR COURT OF CALIFORNIA, COUNTY OF: STREET ADDRESS: 880 FRONT STREET	FOR COURT USE ONLY
MAILING ADDRESS: CITY AND ZIP CODE: SAN DIEGO, CA 92101 BRANCH NAME:	
PLAINTIFF/PETITIONER: DONOGHUE DEFENDANT/RESPONDENT: IMMUNOSYN CORPORATION, ET AL	CASE NUMBER: 08CV0510JMWMC
PROOF OF SERVICE OF SUMMONS	Ref No. or File No. 00S46089-02/1507002

(Separate proof of service is required for each party served)

- 1. At the time of service I was at least 18 years of age and not a party to this action.
- 2. I served copies of the summons and
 - e. other (specifiy documents):

SUMMONS AND COMPLAINT; CIVIL COVER SHEET; PRO HAC VICE APPLICATION

- 3. a. Party Served: (specify name of party as shown on the documents served):

 DOUGLAS MCCLAIN, JR.
 - b. Person Served: KATE G., PERSON IN CHARGE
- 4. Address where the party was served:

4225 EXECUTIVE SQUARE, SUITE 260. LA JOLLA, CA 92037

- 5. I served the party (check proper box)
 - b. by substituted service. On (date):April 1, 2008 at (time): 09:00 am I left the documents listed in item 2 with or in the presence of (name and title or relationship to person indicated in item 3b):

KATE G., PERSON IN CHARGE

Physical Description:

AGE: 25 HAIR: BLK HEIGHT: 5'6 RACE: CAUC
SEX: F EYES: BRN WEIGHT: 115

- (1) **(business)** a person at least 18 years of age apparently in charge at the office or usual place of business of the person to be served. I informed him or her of the general nature of the papers.
- (4) a declaration of mailing is attached
- (5) I attach a declaration of diligence stating actions taken first to attempt personal service.

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PETITIONER: DONOGHUE

RESPONDENT: IMMUNOSYN CORPORATION, ET AL CASE NUMBER:

08CV0510JMWMC

6. The "Notice to the Person Served" (on the summons) was completed as follows:

a, as an individual defendant

7. Person who served papers

a. Name: WILLIAM COX

b. Address: 3500 5th. AVE. SUITE 202, SAN DIEGO, CA 92103 c. Telephone: (619) 299-2012

d. The fee for service was: \$ 40.85

e. I am: (3) a registered California process server

(i) EMPLOYEE OF REGISTERED PROCESS SERVER

(ii) Registration No.: 1249 (iii) County: SAN DIEGO

8. I declare under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

Date:

April 2, 2008

WILLIAM COX

(NAME OF PERSON WHO SERVED PAPERS/SHERIFF OR MARSHALL)

(SIGNATURE)

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